

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.

Filing Date

Application

10/580546

CLAIMS

	AS FILED		AFTER IN AMENDMENT		AFTER IN AMENDMENT			AS FILED		AFTER IN AMENDMENT		AFTER IN AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2				1			51						
3					1		53						
4						1	54						
5							55						
6							56						
7							57						
8							58						
9							59						
10			1				60						
11				1			61						
12					1		62						
13						1	63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20			1				70						
21				1			71						
22					1		72						
23						1	73						
24							74						
25							75						
26							76						
27							77						
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38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			3										
TOTAL DEP.				3									
TOTAL CLAMS													